



SOUTH FLORIDA WATER MANAGEMENT DISTRICT

Form 0970
08/95

APPLICANT TRANSMITTAL FORM FOR REQUESTED ADDITIONAL INFORMATION

(One copy of this form must be included with the 5 sets of information submitted concerning a pending permit application for an Environmental Resource, Surface Water Management or Water Use Permit.)

For submittal addresses, see page 2.

Application #: _____ ER ☐ SW ☐ WU ☐

Project Name: _____

Project Location: County _____ S _____ / T _____ / R _____

Reviewer's Name: _____

Date: _____

Information included in response:		Additional	Revised
1.	_____	<input type="checkbox"/>	<input type="checkbox"/>
2.	_____	<input type="checkbox"/>	<input type="checkbox"/>
3.	_____	<input type="checkbox"/>	<input type="checkbox"/>
4.	_____	<input type="checkbox"/>	<input type="checkbox"/>
5.	_____	<input type="checkbox"/>	<input type="checkbox"/>
6.	_____	<input type="checkbox"/>	<input type="checkbox"/>
7.	_____	<input type="checkbox"/>	<input type="checkbox"/>
8.	_____	<input type="checkbox"/>	<input type="checkbox"/>
9.	_____	<input type="checkbox"/>	<input type="checkbox"/>
10.	_____	<input type="checkbox"/>	<input type="checkbox"/>

Respondent Signature

Projects in the following counties should respond to the corresponding SFWMD Service Center:

Broward, Dade, Highlands, Martin, Monroe, Okeechobee, Palm Beach, and St. Lucie

SFWMD
Regulatory Information Management Division
P.O. Box 24680
West Palm Beach, FL 33416-4680

Charlotte, Collier, Glades, Hendry, and Lee

SFWMD
Key West Professional Center
1342 Colonial Blvd., Suite 81
Ft. Myers, FL 33907

Orange, Osceola and Polk

SFWMD
1756 Orlando Central Parkway
Orlando, FL 32809